

## INSTRUCTIONS FOR PETITIONERS FOR REINSTATEMENT FROM ADMINISTRATIVE SUSPENSION

Rev. 11/22/06

### **Conditions for Reinstatement**

Pursuant to 27 N.C.A.C., Chapter 1D, Rule .0904 of the N.C. State Bar Rules, petitions for reinstatement from administrative suspension (for failure to pay fees or failure to fulfill CLE requirements) must be accompanied by a prescribed petition and the petitioner must

- Pay the reinstatement fee, membership fee, Client Security Fund assessment, late fee (if owed) and Judicial Campaign Fund Surcharge (Judicial Surcharge) for the year in which the petitioner's law license was suspended and for the current year
- Pay all fees owed to the Board of Continuing Legal Education and all other fees or costs due the N. C. State Bar
- Submit letters of reference
- Complete CLE for the year preceding the year in which the petitioner's license was suspended
- If the license was suspended for 2 or more years, complete 15 hours of CLE, including 3 hours of ethics.

### **Procedure**

The petition must be reviewed by the Administrative Committee and approved by the Council of the State Bar. The committee and the council meet quarterly in January, April, July, and October. The dates of the meetings are posted on the home page of the State Bar website.

### **Instructions**

1. Print or type the petition.
2. Pay the \$125.00 reinstatement fee and the membership fees, Client Security Fund assessment, late fee and Judicial Surcharge for the year in which your law license was suspended and for the year in which you file the petition. **The petition must be accompanied by a certified check or cashier's check for the total amount owed. Contact the Membership Department at (919) 828-4620 to obtain this information.**
3. Within one year prior to filing the petition, complete any hours of continuing legal education for the calendar year immediately preceding the year in which your law license was suspended, including any deficit from a prior year that was carried forward and recorded in your CLE record at the time of your suspension. If two or more years elapse between the date your license was suspended and the date the reinstatement petition is filed, you must complete an additional 15 hours of continuing legal education. Of the 15 CLE hours, at least 3 hours must be in the areas of professional responsibility and/or professionalism. Contact the CLE department at (919) 733-0123 for questions regarding your CLE requirements.
4. Provide reference letters from three (3) lawyers and two (2) clients who are familiar with your law practice. If you were not in private practice, attach letters of reference from five (5) people with whom you have professional business relationships (as an employee, customer, or service provider).
5. Submit the petition 30 days prior to the quarterly meeting of the State Bar Council at which you are requesting the Council to take action on the petition.
6. **Mail the petition and any supporting documentation to:**  
N. C. State Bar  
Attn. Membership Dept.  
P.O. Box 25908  
Raleigh, NC, 27611

7. Please contact the Membership Department at (919) 828-4620 if you have any questions or need further assistance regarding your membership status or you do not receive notice that your petition was received.



## THE NORTH CAROLINA STATE BAR

### APPLICATION FOR SUSPENDED ATTORNEY TO BECOME ACTIVE

(rev. 10/04)

#### Instructions to Petitioner

Complete and return the petition to the State Bar with certified funds for the amount indicated in the enclosed letter. Attach letters of reference from three (3) lawyers and two (2) clients who are familiar with your law practice. If you were not in the private practice of law, attach letters of reference from five (5) people with whom you had professional business relationships as an employee, customer, or service provider.

All responses are to be based on your knowledge, unless your response is expressly qualified to show another source of your information. Answer all questions and make your answers as specific as possible. If the space for any answer is insufficient, complete your answer on a separate sheet and attach it to the petition. **PLEASE TYPE OR PRINT YOUR ANSWERS LEGIBLY.**

#### Applicant's Questionnaire and Affidavit

1. State:

(a) Full name \_\_\_\_\_

(b) Current address: Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

(c) Telephone number: Work \_\_\_\_\_ Home \_\_\_\_\_

(d) Fax number \_\_\_\_\_

(e) Have you ever been known by any other name or surname? \_\_\_\_\_ If so, list all other names and the dates and locations where such names were used.

\_\_\_\_\_  
\_\_\_\_\_

If married woman, give maiden name. \_\_\_\_\_

(f) Date of birth \_\_\_\_\_ Birthplace \_\_\_\_\_ Age \_\_\_\_\_

(g) Social Security number \_\_\_\_\_

(h) Date of suspension \_\_\_\_\_

#### FOR OFFICE USE ONLY

ID# \_\_\_\_\_

Dues paid (y/n) \_\_\_\_\_

Reinstatement fee paid (y/n) \_\_\_\_\_

Owes CLE fees (y/n) \_\_\_\_\_

Needs to complete CLE hours (y/n) \_\_\_\_\_

(\_\_\_\_\_ general and/or \_\_\_\_\_ ethics hours)

2. Give a full explanation of your failure to pay the annual fees and assessments, or to meet the annual CLE requirements, in a timely fashion that resulted in your suspension.

3. List all employment since being suspended, in chronological order, beginning with your current employment (attach additional sheet if necessary). Include self-employment, temporary or part time work, employment by relatives, and employment with and without compensation. As to each employment state the following:

Firm or employer \_\_\_\_\_

Supervisor \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

From (M/Y) \_\_\_\_\_ To (M/Y) \_\_\_\_\_

Position(s) held \_\_\_\_\_

Reason for termination \_\_\_\_\_

Firm or employer \_\_\_\_\_

Supervisor \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

From (M/Y) \_\_\_\_\_ To (M/Y) \_\_\_\_\_

Position(s) held \_\_\_\_\_

Reason for termination \_\_\_\_\_

Firm or employer \_\_\_\_\_

Supervisor \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

From (M/Y) \_\_\_\_\_ To (M/Y) \_\_\_\_\_

Position(s) held \_\_\_\_\_

Reason for termination \_\_\_\_\_

4. Since the date of your suspension, have you been discharged or resigned from employment after being told that your conduct was unsatisfactory? \_\_\_\_\_ If yes, explain fully. (Do not repeat information provided in response to question 3 above.)

5. Since the date of your suspension, have you served in the armed forces? \_\_\_\_\_ If separated from the service, state nature of separation and, if other than honorable, explain the circumstances of your release. Give full particulars as to any formal complaints or disciplinary proceedings against you.
- (a) Branch of service:
  - (b) Serial number:
  - (c) Date(s) of active service:
  - (d) Rank:
  - (e) Last service address:
  - (f) Last commanding officer:
  - (g) Separation information:
6. Since your admission to the North Carolina State Bar, if you applied for any license, certificate, or position (e.g., real estate license, CPA license) which required proof of good character, other than a bar application, state the following:
- (a) License/certificate/position sought:
  - (b) Date of application for license/certificate/position:
  - (c) Name and complete address of authority from whom license/certificate/position was sought:
  - (d) Disposition of the application and the reasons therefore (if granted, provide the date and any number for the license or certificate):
7. Since your admission to the North Carolina State Bar, list every application for admission you submitted to any bar, attorney licensing agency, or court, including pro hac vice applications, applications for reinstatement, and subsequently withdrawn applications. For each application, provide the following information:
- (a) Date of application:
  - (b) Name and complete address of licensing authority or court:
  - (c) Jurisdiction of licensing authority or court:
  - (d) Disposition of application and the reasons therefore:
  - (e) If admitted, the date of admission:

8. Since your admission to the North Carolina State Bar, have you been disbarred, suspended from practice, reprimanded, censured, or otherwise disciplined or disqualified (including the revocation of a pro hac vice admission, or a disability or administrative suspension) by a licensing agency, court or professional organization for conduct as an attorney or a member of any profession or organization, or holder of any office, public or private? \_\_\_\_\_ If so, state the following:

19. Nature of discipline, suspension, or disqualification:

20. Date of discipline, suspension, or disqualification:

21. Name/address of person or body with possession of the record:

22. Reason(s) for the discipline, suspension, or disqualification:

Attach copies of all documents relating to such discipline, suspension, or disqualification including the order of discipline or disqualification.

9. Since your admission to the North Carolina State Bar, have any grievances, complaints or charges, formal or informal, been filed or proceedings instituted against you by any bar, court, or licensing agency? \_\_\_\_\_ (Do not repeat the information provided in response to question 8.) If so, state the following:

19. Nature of grievance, complaint or charge:

20. Name/address of person or entity making the grievance, complaint or charge:

21. Date of grievance, complaint or charge:

22. Disposition of grievance, complaint or charge:

23. Name/address of person or entity with possession of the record relating to the grievance, complaint or charge:

Attach copies of all documents relating to the grievance, complaint or charge.

10. Since your admission to the North Carolina State Bar, have you held a bonded position? \_\_\_\_\_ If so, specify the nature of position, dates, amount of bond and whether anyone ever sought to recover upon or cancel the bond. State facts fully, including the name and address of the bonding company, if any.

11. Since your admission to the North Carolina State Bar, have you, in your individual capacity, been a party to any civil proceeding, including bankruptcy but excluding proceedings related to marital dissolution? \_\_\_\_\_ If so, for each proceeding, provide the following information:

19. Name and location of the tribunal:

20. Date, case number, and caption of the pleadings:

21. The nature of the proceeding:

22. Disposition:

23. Location of the record relating to the proceeding:

12. Since your admission to the North Carolina State Bar, have you been charged with, arrested or questioned regarding the violation of any law (include all incidents except for infractions in which an appearance in court could be waived by paying a fine)? \_\_\_\_\_ If so, provide the following information:

19. Name and location of the tribunal:

20. Date, case number, and caption of the pleadings:

21. The nature of the proceeding:

22. Disposition:

23. Location of the record relating to the proceeding:

13. Since your admission to the North Carolina State Bar, have you been charged with fraud or bad faith in any legal proceeding, civil or criminal, or in bankruptcy (include charges by a receiver, trustee, or other authority of a bankrupt estate, for fraudulent conveyance, preference or unlawful concealment of assets)? \_\_\_\_\_ If so, provide the following information.

19. Name and location of the tribunal:

20. Date, case number, and caption of the pleadings:

21. The nature of the proceeding:

22. Disposition:

23. Location of the record relating to the proceeding:

14. Since your admission to the North Carolina State Bar or within the last five years, whichever period of time is less, have you been declared legally incompetent or have you or your property been placed under any guardianship, conservator, or committee; or has any petition or other proceeding been brought requesting that you be declared legally incompetent or requesting that your property be placed under any guardianship, conservator, or committee. \_\_\_\_\_ If your answer is YES, provide the details below and on an attached sheet, if necessary. Include the court, date and circumstances of each proceeding.

15. Since your admission to the North Carolina State Bar or within the last five years, whichever period of time is less, have you voluntarily entered or been involuntarily admitted to any inpatient or outpatient medical, mental health, or substance abuse facility for treatment or evaluation of a mental, emotional, or nervous disorder or condition, or because of substance abuse or addiction? \_\_\_\_\_ If your answer is YES, provide the details below and on an attached sheet if necessary. Identify all involuntary admissions. Provide the full name and mailing address of each facility to which you were admitted, and direct each of these facilities to furnish to the State Bar any information the State Bar may request with respect to any such commitment, evaluation and treatment.



16. Since your admission to the North Carolina State Bar or within the last five years, whichever period of time is less, have you been diagnosed with or have you been treated for bipolar disorder, schizophrenia, or any other psychosis or psychotic disorder, or organic brain syndrome? \_\_\_\_\_ If your answer is YES, provide the details below and on an attached sheet if necessary. If you were treated by any professional or institution in connection with this condition, or have been engaged in any recovery program, provide the name and mailing address of each such professional, institution or program, and direct each to furnish to the State Bar any information that the State Bar may request with respect to any such condition and treatment.
17. Since your admission to the North Carolina State Bar or within the last five years, whichever period of time is less, have you been impaired<sup>1</sup> as a result of your use of alcohol, drugs, or have you been told that you were, or are, impaired as a result of your use of alcohol or drugs? \_\_\_\_\_ If your answer is YES, provide the details below and on an attached sheet if necessary. Include the names and mailing addresses of the person(s) who told you that you were impaired. If you were treated by any professional or institution, or have been in a program of recovery, provide the name and mailing address of each professional, institution or program, and direct each to furnish to the State Bar any information that the State Bar may request with respect to any such impairment and treatment.
18. (a) Are there any unsatisfied judgments against you? \_\_\_\_\_
- (b) Have you any debts which are 90 days past due? \_\_\_\_\_
- If the answer is yes to (a) or (b), list details, giving names and addresses of creditors, amounts, dates and nature of debts or judgments, and the reason for nonpayment. Attach a copy of each judgment entered against you.
19. Since your admission to the North Carolina State Bar, have you timely filed state and federal tax returns for each and every year? \_\_\_\_\_ If not, provide the year, taxing authority, and the current status of the delinquency for each year in which you did not timely file a tax return.
20. Is there any other incident in your career, not herein before referred to, having a bearing upon your character or fitness for readmission to the bar? \_\_\_\_\_ If so, give full details.
21. State the reason for your desire for readmission and give your anticipated employment.

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<sup>1</sup> For purposes of this and all other questions, the term “impaired” or “impairment” means limited in your ability to carry on any life activities to an extent that would have adversely affected your ability to practice law. The ability to practice law requires, among other attributes, an accurate perception of reality, honesty, and the capacity to comprehend facts and circumstances, to reason logically, to communicate, to recognize and appropriately resolve ethical dilemmas, and to perform legal tasks in a timely manner.

22. By executing this petition, you acknowledge that you have not practiced law in the State of North Carolina since your license was suspended.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Sworn to and subscribed before me this  
\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_